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**Aerospace Medicine**

**RESPIRATORY PROTECTION PROGRAM**



**COMPLIANCE WITH THIS PUBLICATION IS MANDATORY**

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This instruction implements the new respiratory protection requirements of the Air Force Occupational Safety Health (AFOSH) Standard (STD) 48-137, **Respiratory Protection Program**, and the 29 **Code of Federal Regulations (CFR)** 1910.134, respiratory protection. It establishes local policies, practices, and procedures for commanders and supervisor of Air Force military and federal civilian employee workers who use respirators while assigned to or working on Vandenberg AFB. This instruction applies to all military organizations where respirator protection (RP) is essential to the safety and health of personnel.

**SUMMARY OF REVISIONS**

This publication was revised to incorporate all the new federal and Air Force changes mandated by the recently revised Occupational Safety and Health Administration (OSHA) requirements as outlined in the most recent 29 CFR 1910.134 and reflected in AFOSH STD 48-137 (1Nov 98). These changes encompass the treating of all emergency breathing apparatus (EBA) as respirators, the requirement for a medical evaluation, respirator fit-testing, initial and refresher training, written respiratory protection programs, documentation requirements, and the annual respiratory protection program evaluation for any and all respiratory protection use. **Attachment 1** is an example of a letter used to request EBA authorization. **Attachment 2** and **Attachment 3** are examples of workplace written respiratory protection programs, known as Operating Instructions (OI) for industrial-use respirators and emergency breathing apparatus (EBA). **Attachment 4** is the 30 SW Respirator Certification Card with explanations of its data-fields.

**1. Responsibilities:**

**1.1. Unit Commanders:**

1.1.1. Enforce the provisions of AFOSH STD 48-137 and this instruction within their respective organizations.

1.1.2. Appoint a Respiratory Protection Program (RPP) monitor and point of contact (POC), hereby known as the “Unit RPP POC”, at each workplace where any type of respirator is used.

1.1.3. Request in writing through 30 ADOS/SGGB (bioenvironmental engineering) and 30 SW/SESI authorization for EBA use. **Attachment 1** is an example of such letter. See SWI 23-105, *Issuing and Controlling Emergency Breathing Apparatus (EBA)* for details.

## 1.2. Supervisors:

1.2.1. Manage the respiratory protection program at their respective work sites.

1.2.2. Ensure each worker complies with all the respiratory protection requirements, such as being medically certified, fit-tested and trained prior to wearing any respirator or EBA.

1.2.3. Be trained and knowledgeable of the requirements to use a respirator.

1.2.4. Direct workers assigned to jobs requiring respiratory protection to contact the Bioenvironmental Engineering Flight (BEF) for initial and annual fit-testing and training. All military and civilian personnel assigned jobs requiring respiratory protection must comply with Occupational Safety and Health Administration requirements. These personnel must receive proper training to fully understand when and how to use a respirator.

## 1.3. Unit RPP POC:

1.3.1. Implement the respiratory protection program (RPP) within their respective workplace.

1.3.2. Correspond with the base respiratory protection Administrator (BEF) on all matters of respiratory protection.

1.3.3. Develop a written RPP operating instruction (OI) that describe the work-specific procedures or events that may require respiratory protection to be used. This OI must include a current list of authorized respirator users. **Attachment 2** and **Attachment 3** are OI examples. Submit this OI for BEF approval and update it annually.

1.3.4. Request BEF evaluation of proposed changes to work processes that may require respiratory protection, before the process is put into production.

1.3.5. Document initial and annual respirator training on the user’s AF Form 55, **Employee Safety and Health Record**.

1.3.6. Direct workers to the Optometry Clinic if corrective lenses are needed while wearing a full-face respirator. Provide the worker with the necessary system or kit for mounting the corrective lenses into the BEF approved respirator. The system or kit are unique to each manufacturer’s equipment and must be ordered along with the worker’s respirator from supply.

1.3.7. Ensure that individually issued respirators are indelibly marked with the worker’s name or unique identification code, e.g., last four of their social security number.

1.3.8. Ensure compressed breathing air meets the requirements of Technical Order (T.O.) 42B-1-22, Table 2-1 and AFOSH 48-137 Attachment 13 *Breathing Air Testing Requirements* where supplied-air respirators are used.

1.3.9. Ensure all the EBAs used and stored by the unit are inspected monthly, and a record of the inspection is kept. This inspection shall be documented, i.e., name of inspector, EBA serial num-

ber, date of inspection, and outcome. The preferred method of documentation is a tag affixed to the EBA.

1.3.10. Ensure the contractor (United Paradyne, as of Oct 2000) provides ELSA training and guidance to bonafied visitors in potentially hazardous situations, e.g., rocket launches that are unique and non-recurring. The unit is then responsible for the visitor's safety.

#### 1.4. Respirator Users:

1.4.1. Be medically evaluated and certified as medically able to wear a respirator prior to wearing all respirators or EBA, other than Emergency Life Support Apparatus (ELSA) and filtering facepieces. Annual re-evaluation is required and may be done during the worker's annual Preventive Health Assessment (PHA).

1.4.2. Be fit-tested prior to wearing a respirator which has a tight fitting facepiece, i.e., self-contained breathing apparatus (SCBA), or industrial-type cartridge respirators. Fit-testing is required initially and annually thereafter, and whenever a new model, make, or design of the fitted respirator is procured.

1.4.3. Be trained initially and annually thereafter. The base Bioenvironmental Engineer or his/her designee will provide the initial and annual respirator training. The EBA contractor is authorized to train EBA users only. The Fire Department is authorized to train firefighters in the use of SCBA. Users must be able to demonstrate proficiency on:

1.4.3.1. Why the respiratory protection is necessary and how to use it.

1.4.3.2. The limitations and capabilities of the type of respirator used.

1.4.3.3. How to inspect and check the respirator prior to use.

1.4.3.4. The medical signs and symptoms that may limit or prevent effective use of the respirator.

1.4.3.5. The general requirements of the OSHA respirator law.

1.4.4. Be trained on the specific workplace hazards the respirator will protect against, and any local workplace-unique procedure, such as the local storage locations for EBA. Supervisors or Unit RPP POC shall provide this training. This workplace specific training may stand alone, or be done in conjunction with the annual Hazard Communication (HAZCOM) training requirement.

1.4.5. Inspect the respirator prior to it being carried into the workplace for use. This inspection shall be documented for EBA, i.e., name of inspector, EBA serial number, date of inspection, and outcome. The preferred method of documentation is a tag affixed to the EBA.

1.4.6. Inform their supervisor of any compromising condition that may affect the seal of their tight-fitting respirator, e.g., facial hair, or their ability to wear the respirator, i.e., a medical ailment.

1.4.7. All respirator users will be issued a 30 SW **Respirator Certification Card** that is only valid for the type of respirator or EBA indicated as being used by that person. The base Bioenvironmental Engineer or his/her designee, e.g., the base EBA contractor, will issue this card to the user. This card will document that the EBA user has a current unit OI, has been trained within the last 12 months, and has been medically cleared and fit-tested for the type of respirator assigned to them. Possession of this card is not mandatory, but compliance with the actions it documents is

mandatory. The card is issued as a convenience to the user and his or her unit as proof of compliance. The card may be used by the unit as a program tool, e.g., the card is required before being issued an ELSA, the card is filed by the unit RPP POC as a training record.

### **1.5. Bioenvironmental Engineering Flight (BEF or 30 ADOS/SGGB):**

1.5.1. Administer the base respiratory protection program. Serve as the RPP office of primary responsibility (OPR) and technical consultant for Vandenberg AFB.

1.5.2. Direct, review, and ensure compliance for the delegated respiratory protection program functions, i.e., EBA contractor and Fire Department.

1.5.3. Identify potentially hazardous exposure conditions, evaluate the conditions under which respirators must be worn and specify the types of respiratory protection required for the work process.

1.5.4. BEF shall select the appropriate respiratory protection and use the flowchart in AFOSH 48-137, **Attachment 3** to determine the appropriateness of a respirator selection. AF Form 2773 **Respirator Selection Worksheet** shall be used unless a database and the 30 SW **Respirator Certification Card** contains the information on AF Form 2773.

1.5.5. Evaluate organizational respiratory protection procedures, practices, and written programs and OIs, and recommend corrective actions when deficiencies are noted.

1.5.6. Monitor and control respirator issue from supply as deemed necessary to ensure the appropriate respirators is available to the workplace.

1.5.7. Enroll and monitor all workers in the respiratory protection program who wear a respirator to perform their duties.

1.5.8. Conduct fit-testing and training of workers who wear negative pressure respirators when working with Asbestos, Benzene (29 CFR 1910.1028), Lead (29 CFR 1910.1025), or other toxic substances at the schedule specified by Air Force or Occupational Safety and Health Administration instructions. Fit-testing and training will also be performed for workers if the supervisor determines the worker has insufficient knowledge of respirator use or the respirator appears not to fit properly.

1.5.9. The BEF shall develop and maintain a training lesson plan using Attachment 10 of AFOSH STD 48-137.

1.5.10. Document all fit-testing. A database, i.e., PortaCount Plus or Command Core, may be used in lieu of AF Form 2772, **Certificate of Respirator Fit Test**.

1.5.11. Provide initial training of supervisors who have the responsibilities of overseeing work activities of respirator users. Training will be repeated when a supervisor has a permanent change of station or becomes the supervisor of a different workplace.

1.5.12. Provide assistance as required in the procurement of respirators and respirator parts.

### **1.6. Flight/Missile Medicine Flight (30 ADOS/SGGF):**

1.6.1. Perform medical evaluation for military and federal civilian workers who use respirators to determine if workers are physically able to perform duties while using a respirator.

1.6.2. Review the medical history of the worker to identify previous medical conditions which could preclude respirator use.

1.6.3. Administer the medical surveillance of workers enrolled in the respiratory protection program.

1.6.4. In accordance with AFOSH STD 48-137, paragraph 5.5., **Respiratory Protection Program (RPP)** questionnaire is a one-time certification process and that examinee is given a RPP Certification Card to be shown annually for fit-testing.

**1.7. Public Health Flight (30 ADOS/SGGM)** will identify workers who require an occupational examination for respirator use.

**1.8. Optometry Flight (30 ADOS/SGGE)** will mount the corrective lenses from the system or kit inside the full facepiece respirator. Temple bars or bands that extend beyond the edge of the respirator are not permitted for any tight-fitting industrial respirators.

**1.9. Fire Chief (30 CES/CEF):**

1.9.1. Comply with the requirements of this instruction for all firefighters wearing Self-Contained Breathing Apparatuses (SCBA) with the exception of fit-testing and training.

1.9.2. Develop and maintain a written fit-test and training program in accordance with the provisions in 29 CFR 1910.134 and AFOSH 48-137.

1.9.3. Maintain a record of all fit-tests, e.g., the "PortaCount Plus" database, and supply a copy of the fit-test to BEF within 30 days of the test.

1.9.4. Report any fit-test abnormalities or problems to BEF within three workdays.

1.9.5. Maintain a record of training performed within the last calendar year.

**1.10. Base Supply will control the issue of respirators** and will ensure BEF has approved all respiratory protection requests before issuing respirators. This includes ensuring a "SUITABLE SUBSTITUTE" for a particular respirator or respirator part is not issued.

**1.11. The EBA contractor (currently United Paradyne)** will provide EBA fit-tests, training, certification cards, and EBA devices to all military and federal civilian requesters upon receipt of a letter of authorization signed by the unit commander and coordinated through 30 ADOS/SGGB and 30 SW/SES.

**2. Respiratory Protection Program (RPP):** This instruction applies to all respiratory protection to include all types of EBA such as Emergency Life Support Apparatuses (ELSA), hooded-demand valved (HDV) ELSA, and the so called "disposable" respirators, or filtering facepieces.

**2.1. The Self-contained Atmospheric Protection Ensemble (SCAPE):** Federal regulatory agencies do not consider SCAPE as a respirator. However, military organizations on Vandenberg (to include federal civilian employee) shall maintain a respiratory protection program in compliance with this standard to ensure the safety of SCAPE users.

**2.2. Filtering Facepiece Devices.** Other than ones used for the protection against tuberculosis (TB), filtering facepiece are not considered respirators. These devices may only be used in medical situations, or when specifically designated by BEF as for comfort-use only. All other uses are prohibited. If used, supervisors shall train workers on the limitations of the filtering face piece device.

**2.3. Military Unique Respiratory Protection:** The military gas mask, i.e., M-17, shall only be used in military unique operations and when directed by written AF policy or Technical Order (TO). It's the user's responsibility to show proof of such direction.

**2.4. Elective Use of Respirators:** Military or federal civilian employees in Air Force workplaces can not elect to wear a respirator. BEF approval is required for all respirator use.

**2.5. Respirator Use:** No AF military or federal civilian employee may wear a respirator unless required or recommended by BEF.

**2.6. Respirator NIOSH Certification:** Any and all respirators used under this program shall be certified by the National Institute for Occupational Safety and Health (NIOSH). NIOSH certification numbers are prefixed with the letters TC. Respirator without NIOSH TC numbers shall not be used.

**2.7. Respirator Use Validation:** Normally, the need to wear a respirator will be validated by the results of air sampling conducted in the workplaces. However, respirator policies specified in technical orders, instructions, or higher headquarters policy letters will take precedence over air sampling results. In work situations where timely air sampling is not feasible, BEF may recommend respiratory protection based on observation of the work process and professional judgment/experience.

**2.8. Tight-fitting Respirators:** No tight-fitting respirator may be worn unless previously fit-tested. Any changes in the respirator's make, model, facepiece design or material, size, etc, requires the new respirator be fit-tested prior to use.

**2.9. Emergency Breathing Apparatuses:** EBA are respirators and their users shall comply with all the respiratory protection program requirements with the following exceptions.

2.9.1. Hooded-type EBA, such as ELSA and HDV, do not require their users to be fit-tested nor medically certified.

2.9.2. EBA must be inspected monthly and when brought into the work situation in which it may be used.

2.9.3. Bonafide visitors to potentially hazardous situations, e.g., rocket launches, may be trained by the unit RPP POC to use an ELSA for a unique and non-recurring requirement. Other than being operationally trained to use the ELSA, these visitors need not comply with the provisions of this instruction.

**3. RPP Written Program:** All units with members who use respirators must have a written workplace-specific RPP program, known as an Operating Instruction (OI). **Attachment 2** is an example of a written program suitable for industrial respirator use. **Attachment 3** is an example of a workplace written respiratory protection program, for EBA. This written program (or OI) must describe:

**3.1. Procedures for selecting the appropriate respirator or EBA for the task at hand.** Each respirator must be matched with the specific hazard it is certified to protect against by the base Bioenvironmental Engineer.

**3.2. The exact type of respirator required to include maker, model number, type of filters (if needed), etc.**

**3.3. The medical evaluation requirements for the type of respirator used.**

**3.4. Fit-testing requirements for the type of respirator used.**

**3.5. Procedures for proper use of the respirator**, to include how EBAs are made available to their potential user, e.g., carried on-site or centrally stored.

**3.6. Procedures for inspecting and maintaining the unit's respirators and EBA.**

**3.7. Training of the respirator and EBA users** in the respiratory hazards they are potentially exposed to during routine and emergency situations, respectively.

**3.8. Documentation of the records and the accomplished compliance procedures, e.g., training and mandated EBA inspection.**

**3.9. A detailed description of the cartridge change-out schedule when cartridge-type respirators are used.**

**3.10. Procedures to annually evaluate the effectiveness of the unit's RP program**, i.e., when and how to run the RPP self-inspection checklist, refer to 30th Space Wing Inspection Checklist 48-1b, Unit RPP Checklist. (see <http://svepdl.vandenberg.af.mil/sip/checklist.html>)

#### **4. Training.**

**4.1. The base Bioenvironmental Engineer** or his/her designee will initially and annually train all respirator users, and initially train their supervisors.

**4.2. The EBA contractor is authorized to train EBA users only.**

**4.3. The Fire Department is authorized to train firefighters in the use of SCBA only.**

**4.4. Initial and annual respiratory protection training shall encompass the following topics:**

4.4.1. Why the respirator is necessary and how to use it.

4.4.2. The limitations and capabilities of the type of the respirator used.

4.4.3. How to inspect and check the respirator prior to use.

4.4.4. The medical signs and symptoms that may limit or prevent effective use of the respirator.

4.4.5. The general requirements of the OSHA respirator law.

**4.5. The Supervisor or Unit RPP POC** shall train their unit's respirator users on the specific workplace hazards the respirator will protect against, and any local workplace-unique procedure, such as the local storage locations of EBA. This workplace specific training may stand alone, or be done in conjunction with the annual Hazard Communication (HAZCOM) training requirement.

**5. Contractors:** Contractors and commercial space-launch operators who operate on base should develop and implement a respiratory protection program for their respirator users which meets or exceeds the requirements of the federal OSHA 29 CFR 1910.137 or the California OSHA's respiratory protection program, whichever applies. BEF's treatment of contractors' respiratory protection program does not absolve nor endorse the contractor's Fed OSHA or Cal OSHA responsibilities or actions.

**5.1. Forms Adopted:** AF Form 55, **Employee Safety and Health Record**, AF Form 2772, **Certificate of Respirator Fit Test**, AF Form 2773 **Respirator Selection Worksheet**.

CHARLES W. CAMPBELL Jr., Colonel, USAF, MC, FS  
Commander, 30th Medical Group

ATTACHMENT 1

EBA LETTER TEMPLATE

Date

MEMORANDUM FOR: 30 ADOS/SGGB  
30 SW/SES  
IN TURN

FROM: <Requesting Unit>

SUBJECT: Emergency Breathing Apparatus Use Request

1. Request approval for <unit name and location> to use emergency breathing apparatus (EBA). The EBA type we currently have on hand is/are <e.g., ELSA, HDV, HEED, or SCBA>. We required EBA for <state requirement and proposed use, e.g., emergency escape during launch anomaly>.
2. The unit currently has \_\_\_ personnel who need \_\_\_ ELSAs, \_\_\_ personnel who need \_\_\_ HDVs, \_\_\_ personnel who need \_\_\_ HEEDs, and \_\_\_ personnel who need \_\_\_ SCBA. Please refer to attached personnel listing ([Attachment 1](#)) which identifies the individual and EBA type they require.
3. We understand the AF and OSHA new requirement to maintain a unit specific respiratory protection (RP) program. This RP program will include a written Operating Instruction (OI), monthly inspections of the EBA's, annual training of EBA users, documentation of inspections and annual training, fit testing and medical certification for only SCBA users, and program evaluations. Our unit's RP program OI is attached for your use as a sample.
4. The Unit EBA Monitor is <rank/name>. This appointed individual will be the point of contact (POC) in all EBA matters. Please direct any questions and comments to him/her at DSN <xxx-xxxx>.

<CC SIGNATURE BLOCK>

Attachments to EBA Sample Letter:

1. EBA Personnel Listing (Not Shown)
2. Workplace RP Program O.I. (Not Shown)

## ATTACHMENT 2

## UNIT RPP OPERATING INSTRUCTION (SAMPLE)

30 XXX OI 48 XXX

Date

BY ORDER OF THE COMMANDER, 30 XX

30 XXX OI 48-XXX

1 MARCH 2000

Aerospace Medicine

RESPIRATORY PROTECTION PROGRAM

OPR: 30 XXX/XX (MSgt John Doe)

Certified by:

Supersedes 30 XXX OI 48-XXX, dated

Pages: 3/Distribution: F

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This operating instruction establishes procedures for conducting an effective respiratory protection Program. References: AFOSH STD 48-137 and 30 SWI 48-103. Specific questions concerning the respiratory protection should be directed to 30th Aeromedical Dental Squadron Bioenvironmental Engineering Flight (BEF) at extension 6-7811.

**A2.1. GENERAL:** Respiratory protection is required in this work area because certain operations may generate airborne contaminant levels above occupational exposure limits (OEL). In particular, the listed respirators and cartridges must be worn when performing the listed operations:

A2.1.1. Hazardous Operation	Respirator	Cartridge
<Operation #1	Respirator #1	Type of Cartridge>
<Operation #2	Respirator #2	Type of Cartridge>
A2.1.2. The unit RPP POC is: < Name of Unit and this OI's OPR>		

**A2.2. RESPIRATOR USER TRAINING:** BEF will provide initial supervisory and worker training concerning the respiratory protection and respirator use.

A2.2.1. Refresher training will also be conducted by BEF, annually as a minimum. Topics to be covered during this training are as follows:

A2.2.1.1. The respiratory hazard and what happens if the respirator is not used properly.

A2.2.1.2. The engineering and administrative controls being used and the need for respirators is to provide protection.

A2.2.1.3. The reason for selecting the particular respirator used in this shop.

A2.2.1.4. The function, capabilities, and limitations of the selected respirator.

A2.2.1.5. The method of donning the respirator and checking its fit and operation.

A2.2.1.6. The proper wear of the respirator.

A2.2.1.7. Respirator Maintenance

A2.2.1.8. Recognizing and handling emergency situations

A2.2.2. This training will be documented by the shop supervisor on the worker's AF Form 55.

**A2.3. RESPIRATOR ISSUE:** Respirator issue documents will be coordinated through BEF to ensure that the correct respirator is being ordered. Respirators are nationally stock listed in the 4240 stock class. Respirators issued to personnel in the shop will be maintained by the person to whom they were issued.

**A2.4. PRE- AND POST-USE RESPIRATOR INSPECTION:** Respirators will be inspected before and after each use. Problems with respirators will be brought to the attention of the supervisor for correction. Ensure that items specific to the respirator which are covered in the manufacturer's literature are also inspected.

**A2.5. ROUTINE/NON-ROUTINE RESPIRATOR USE MONITORING:**

A2.5.1. Positive/Negative Pressure Checks: Each time a respirator is donned for use during one of the operations listed in paragraph 1., a positive and negative pressure check will be performed.

A2.5.1.1. Positive Pressure Test: Close off the exhalation valve and exhale gently onto the facepiece. The face fit is considered satisfactory if a slight positive pressure can be built up inside the facepiece without any evidence of outward leakage of air at the seal. For most respirators this method of leak testing requires the wearer to first remove the exhalation valve cover before closing off the exhalation valve and then carefully replacing it after the test.

A2.5.1.2. Negative Pressure Test: Close off the inlet opening of the cartridges by covering with the palm of the hands or by replacing the seals, inhale gently so that the facepiece collapses

slightly, and hold the breath for ten seconds. If the facepiece remains in its slightly collapsed condition and no inward leakage of air is detected, the tightness of the respirator is considered satisfactory.

A2.5.2. Cartridge Replacement: Cartridges will be replaced at the end of their service life. If no end-of-service-life indicator is on the cartridge, then a change out schedule shall be determined. This change out schedule must conform with the hazard at hand, contain the manufacturer's data on service life, and be approved by the BEF. BEF can help with this determination.

A2.5.2.1. The change out schedule for this workplace is:

<type of cartridge>                      <operation used for>                      <change out period>

A2.5.3. Maintenance: Respirator maintenance will be carried out quarterly, or more often as necessary to maintain the integrity of the respirator. Each wearer shall be provided with a respirator that is clean and in good operating condition. Maintenance shall include:

A2.5.3.1. Washing, sanitizing, rinsing and drying.

A2.5.3.2. Inspection for defects.

A2.5.3.3. Replacement of worn or deteriorated parts and repair, if necessary. Repairs can only be made with parts designed for that respirator. Interchanging parts between types or manufacturers voids approval of the respirator. No attempts will be made to replace components or to make adjustments or repairs beyond the manufacturer's recommendations. Reducing or admission valves and regulators will be returned to the manufacturer or other trained technician for adjustment and/or repair.

A2.5.3.4. Written records of maintenance actions taken will be kept.

A2.5.4. Storage: Respirators shall be stored to protect against dust, sunlight, excessive heat, extreme cold, excessive moisture, damaging chemicals, and physical damage. The storage area must be a convenient, clean, and sanitary location. Respirators will not be stored in lockers or tool boxes, or under vehicle seats unless it is in a sealable (zip seal) plastic bag in a crushproof carrying case or carton. Respirators will not be hung by their straps for storage. If the respirator cannot be stored in the manufacturer's original plastic bag and box it shall be stored in a sealable (zip seal) plastic bag in a single layer. The storage position will be in such a way that the facepiece and exhalation valve rest in a normal position and the function of the respirator will not be impaired by the elastomeric parts taking a set in an abnormal position.

A2.5.5. Exit Hazardous Area. A respirator wearer will be permitted to leave the hazardous area for any respirator-related cause. Reasons which may cause a respirator wearer to leave a hazardous area include, but are not limited to:

A2.5.5.1. Failure of the respirator to provide adequate protection.

A2.5.5.2. Malfunction of the respirator.

A2.5.5.3. Detection of the leakage of air contaminant into the respirator.

A2.5.5.4. Increase in resistance of respirator to breathing.

A2.5.5.5. Severe discomfort in wearing the respirator.

A2.5.5.6. Illness of respirator wearer, including: Sensation of dizziness, nausea, weakness, breathing difficulty, coughing, sneezing, vomiting, fever and chills.

**A2.6. RESPIRATORY HAZARD MONITORING:** The supervisor will ensure the hazard necessitating the use of respirators is evaluated by BEF at least annually.

**A2.7. PROGRAM EVALUATION:** At least annually, the EBA POC shall evaluate the EBA program and document such evaluation for the record and the commander's review. An evaluation must address all aspects of the EBA program as outlined in this OI, e.g., a self-inspection using a checklist containing the OI elements.

Signature

**ATTACHMENT 3****WORKPLACE RP PROGRAM OI TEMPLATE**

30 SW OI 48-XXX

BY ORDER OF THE COMMANDER 30 XXX

30 SPACE WING OPERATING INSTRUCTION 48-XXX

1 MARCH 2000

Aerospace Medicine

EMERGENCY BREATHING APPARATUS, RESPIRATORY PROTECTION PROGRAM

OPR: Name of Unit and this OI's OPR

Certified by:

Supersedes:

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This operating instruction establishes procedures for conducting an effective Emergency Breathing Apparatus (EBA) Respiratory Protection Program (RPP). Respiratory protection references: 29 CFR 1910.134, AFOSH STD 48-137, 30 SWI 48-103, and ANSI STD Z88.2-1992. Specific questions concerning the respiratory protection program should be directed to 30th Aeromedical Dental Squadron, Bioenvironmental Engineering (BEF) Flight, extension 6-7811.

A3.1. EBA USE: BEF evaluated the EBA usage in the workplace and determined that <EBA Type> provide(s) appropriate respiratory protection. Therefore, EBA use is required in this workplace due to listed operations potentially generating hazardous airborne contaminant levels. Listed below is/are EBA's required to be worn during the following operations:

<u>Operation/Process</u>	<u>EBA Type</u>
<i.e. Emergency egress from an entrapped hazardous area	ELSA>
<p>A3.1.1. The EBAs will be readily available when performing the operations in which they are required. For &lt;state which operations are routine&gt; operation(s) EBA will be staged. &lt;State if the EBA is centrally located, and if so, where are the EBA staging locations are and how personnel access them&gt; For &lt; state the specific operation(s)&gt; operation(s) EBA will be personally carried. State if and how the EBA will be brought to the immediate area during the required operation(s).&gt;</p> <p>A3.1.2. Unit EBA Monitor/POC: &lt;name and phone number&gt;</p>	

### A3.2. SCBA USER REQUIREMENTS:

A3.2.1. Medical Evaluation: Flight medicine (30 ADOS/SGGF) shall medically evaluate the worker to determine if he/she is physically able to use a tight fitting respirator (i.e., SCBA). Medical evaluations are performed initially and annually thereafter. After workers are medically cleared, fit-testing shall commence.

A3.2.2. Fit-Testing: Before workers may wear EBA with a tight fitting facepiece (i.e., SCBA), the workers must be fit-tested with the same make negative or positive, model, style, and size of the respirator that will be used in the workplace. Quantitative fit-testing is provided by United Paradyne and shall be performed initially and annually thereafter.

### A3.3. RESPONSIBILITIES:

A3.3.1. The commander will direct the implementation of this program and the organization's compliance with AF and 30 SW Instructions concerning RPP.

A3.3.2. The workplace supervisor will implement and manage this program.

A3.3.3. The EBA Monitor/POC will execute this program by accomplishing the following:

A3.3.3.1. Coordinating the issue, storage, refurbishment, and use of EBA.

A3.3.3.2. Requesting all new EBA users be enrolled into the EBA program for issue, training and fit-testing when needed.

A3.3.3.3. Perform workplace specific training to all EBA users annually, e.g., which operations require what EBA, where the workplace centrally stores EBA and how to access it, etc.

A3.3.3.4. Ensuring EBA users receive both the core and workplace EBA training, and documenting it on the appropriate unit record, i.e., AF Form 55.

A3.3.3.5. Ensuring EBA inspections are accomplished at the required times.

A3.3.3.6. Ensuring all EBA users have a current and valid 30 SW Respirator Certification Card (see [Attachment 4](#)).

A3.3.3.7. Ensuring workplace complies with all EBA program requirements. Compliance is an on-going process. At a minimum, annually update the unit's EBA request letter and workplace EBA OI, and do a compliance evaluation (e.g., program self-inspection).

A3.3.3.8. The POC will act as the unit's liaison with BEF, and United Paradyne on EBA matters.

A3.4. EBA USER TRAINING: A 30 SW service contractor (currently United Paradyne) will provide core-knowledge EBA training to all users initially and annually thereafter. The core-knowledge training shall cover all the required topics (e.g., EBA use, limitations, donning, etc.) except that specific to the workplace (e.g., local procedures and policy, storage locations, etc.). The workplace specific training will be provided by the workplace EBA POC who is named in 1.2. The EBA POC will ensure all training is scheduled, accomplished, and documented for all EBA users.

A3.4.1. United Paradyne will conduct core-knowledge EBA training. Topics to be covered during this training are as follows:

- A3.4.1.1. The respiratory hazard and what happens if the EBA is not used properly.
- A3.4.1.2. The sheltering and administrative controls used in lieu of EBAs to provide protection.
- A3.4.1.3. The reason(s) for selecting the particular EBA.
- A3.4.1.4. The function, capabilities, and limitations of the selected EBA.
- A3.4.1.5. The method of donning the EBA and checking its fit and operation.
- A3.4.1.6. Proper wear and use of the EBA.
- A3.4.1.7. EBA maintenance, the inspection requirements and their procedures.
- A3.4.1.8. Recognizing and handling emergency situations.

A3.4.2. Workplace specific training shall be conducted annually the EBA POC or his/her delegated representative. Topics to be covered during this training are as follows:

- A3.4.2.1. The hazard and reason for selecting the EBA used in this shop.
- A3.4.2.2. The sheltering and other controls used to provide protection in lieu of EBAs in this shop.
- A3.4.2.3. The workplace location and access of any centrally stored EBAs.
- A3.4.2.4. The workplace procedures, requirements, and hazardous operations where EBAs must be individually carried by the person the EBA is designed to protect.
- A3.4.2.5. The workplace's before-use and monthly inspection requirements and documentation procedure.
- A3.4.2.6. Emergency procedures specific to the workplace that may require EBA use, e.g., egress routes.

A3.5. EBA ISSUE: All EBA issue requests will be coordinated through BEF (30 ADOS/SGGB) and base Safety office (30SW/SES) to ensure that the appropriate EBA is ordered. No one will be issued a EBA unless a coordinated request letter is on file at the point of issue. United Paradyne (UP) will handle the issue of EBA. EBA will be issued to the user's work center. The EBA monitor will be the POC for all EBA issues.

A3.6. EBA INSPECTION: EBAs will be inspected monthly and before being carried into the work situation requiring the EBA. The inspector shall document this inspection on the tag or label provided for that purpose (i.e., a tag on the EBA). Problems with EBAs will be brought to the attention of the supervisor for immediate correction. The EBA monitor will ensure the monthly inspections are accomplished and docu-

mented. When preparing EBA RPP, refer to 30th Space Wing Inspection Checklists 48-1a, **Emergency Breathing Apparatus (EBA) Program** and 48-1c, **ELSA and HDV Inspection Checklist**. (see <http://svepdl.vandenberg.af.mil/sip/checklist.html>)

A3.7. EBA MAINTENANCE: EBA maintenance is required for maintaining the integrity of the EBA. Needed maintenance (annual or sooner if problems arise) will be provided by United Paradyne. User maintenance on SCBAs may include:

A3.7.1. Washing, sanitizing, rinsing, and drying of the SCBA facepiece.

A3.7.2. Inspections for defects.

A3.7.3. Replacement of worn or deteriorated parts and repair, if necessary. Repairs can only be made with parts designed for that EBA. Interchanging parts between types or manufacturers voids approval of the EBA. No attempts will be made to replace components or to make adjustments or repairs beyond the United Paradyne's instructions or the manufacturer's recommendations. Reducing or admission valves and regulators will be returned to the manufacturer or other trained technician for adjustment and/or repair.

A3.7.4. Written records of maintenance actions taken will be kept on file.

A3.8. STORAGE: When not in use, EBAs shall be stored to protect against dust, sunlight, excessive heat, extreme cold, excessive moisture, damaging chemicals, and physical damage. The storage area must be a convenient, clean, and in a sanitary location. Do not store EBA under conditions that can lead to damage, e.g., loose in the trunk of a moving vehicle. The storage location for <name the locations where your unit stores or stages EBAs if no attachment is used> is included as EBA Storage Location, **Attachment 1** (not shown).

A3.9. DOCUMENTATION:

A3.9.1. EBA training will be documented on the worker's AF Form 55 or a similar document for DoD employees.

A3.9.2. EBA inspections will be documented on the EBA inspection tag.

A3.9.3. EBA program evaluation will be documented and reviewed by the unit commander.

A3.9.4. A list of the location(s) where the EBAs are stored will be maintained to this OI. In this situation refer to EBA Storage Location, **Attachment 1** (not shown).

A3.9.5. A current list of personnel who have been identified as EBA users and who have been enrolled, medically certified, and trained shall be maintained to this OI. In this situation refer to for personnel enrollment listing, **Attachment 2** (not shown).

A3.10. PROGRAM EVALUATION: At least annually, the EBA POC shall evaluate the EBA program and document such evaluation for the record and the commander's review. An evaluation must address all aspects of the EBA program as outlined in this OI, e.g., a self-inspection using a checklist containing the OI elements.

<COMMANDER'S or EQUIVALENT SIGNATURE>

Attachments:

1. EBA Storage Locations (Not Shown)
2. RPP Personnel Enrollment Listing (Not Shown)

ATTACHMENT 4

RP CARD

<b>30 SW RESPIRATOR CERTIFICATION CARD</b>	Bearer has met respirator requirements for: <u>RP TYPE</u>		
NAME	HDV ESLA		
ORG/SHOP: <u>Certifier's Name/Date/Org and Check Block:</u>	SCBA	<u>MODEL</u>	<u>SIZE</u>
Medical: _____	SCAPE	ISI	N/A
Training/OI: _____	Air Pur. Full Face	ISI	N/A
Fit-test: _____	Air Pur. Half Face	Draeger/Interspiro	N/A
	TB FED	Cat: 123456	On File
	Supplied Air	3M North MSA	L M S
	Other:	3M North MSA	L M S